

City of Brazil Utilities
Application for Water/Waste Water Tap Permits

Application No. _____

Type of Tap:

☐

Water Tap

☐

Sewer Tap

☐ Service Location currently within the Corporate limits of Brazil

☐ Service Location currently **NOT** within the Corporate limits of Brazil

☐ Existing Service available at Property Line

☐ Requires Tapping of mainline

Service Address: _____

Lot: _____ Block : _____ Subdivision/Land Status: _____

Meter Size: _____ Irrigation Meter Size: _____

Customer/Company Name: _____

DL# or Tax ID#: _____ or Social Security No: _____

Billing Address: _____

Phone #: _____ Alt Phone #: _____

Type of Structure to Receive Service (check all that apply)

<input type="checkbox"/> Home/Single Family	<input type="checkbox"/> Commercial Business	<input type="checkbox"/> Gov/Non Profit
<input type="checkbox"/> Apartment Complex	<input type="checkbox"/> Industrial	<input type="checkbox"/> Other
<input type="checkbox"/> Townhouse/Condo	<input type="checkbox"/> Religious Facility	<input type="checkbox"/> Residential Irrigation meter:
<input type="checkbox"/> Four-Dwelling Units	<input type="checkbox"/> Education Facility	
Address: _____ Acct #: _____ Meter #: _____		

I have read the "Applicant's Instructions and Conditions" and agree to the terms of this Tap Application.

The Tap Permit will expire two (2) years after the date of issue; refunds will not be processed after the expiration date.

Applicant's Printed Name: _____

Signature: _____ Date: _____

Utilities Office Use Only

Account Number: _____

Water Tap: Available: YES NO
Location: _____ Type/Size: _____

Connection Permit Fee: _____ + _____ (Cost of Meter)
+ _____ (Linear Foot) = **Total Water Tap Fee:** _____

Date Mtr Set: _____ Meter ID: _____ Read: _____

Inspected by: _____ s/o #: _____

Sewer Tap: Available: YES NO
Location: _____

Connection Permit Fee: _____ + _____ /LF of pipeline and/or EDU
Total Sewer Tap Fee: _____

Inspected by: _____ s/o #: _____

Comments: _____